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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF VIRGINIA	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	 Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	t 1: Identify Yourself						
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
1.	Your full name						
	Write the name that is on your government-issued picture identification (for example, your driver's	Benjamin First name	First name				
	license or passport).	Middle name	Middle name				
	Bring your picture identification to your meeting with the trustee.	Washington Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)				
2.	All other names you have used in the last 8 years						
	Include your married or maiden names.						
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1780					

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Debtor 1 Benjamin Washington

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs				
5.	Where you live	5631 Drayton Landing Court	If Debtor 2 lives at a different address:				
		Chester, VA 23831 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Chesterfield					
		County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6.	Why you are choosing this district to file for	Check one:	Check one:				
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)				

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Debtor 1 Benjamin Washington Case number (if known)

⊃ar	t 2: Tell the Court About	Your B	ankruptcy Ca	ase						
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	choosing to file under	☐ CI	hapter 7							
		□ с	hapter 11							
		□ сі	hapter 12							
		C	hapter 13							
		_ 0.	napior 10							
3.	How you will pay the fee		about how yo	ou may pay. Typ attorney is subi	oically, if you are pa	ying the fee	check with the clerk's office in your local court for more e yourself, you may pay with cash, cashier's check, or behalf, your attorney may pay with a credit card or che	money		
					tallments. If you ches (Official Form 103		option, sign and attach the Application for Individuals to	Pay		
			but is not req applies to yo	uired to, waive y ur family size ar	your fee, and may ond you are unable to	do so only if o pay the fe	ption only if you are filing for Chapter 7. By law, a judge if your income is less than 150% of the official poverty see in installments). If you choose this option, you must Official Form 103B) and file it with your petition.	line that		
) .	Have you filed for bankruptcy within the	■ No).							
	last 8 years?	☐ Ye	es.							
			District			nen	Case number			
			District		Wr	nen	Case number			
			District		Wh	nen	Case number			
0.	Are any bankruptcy	■ No)							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	9S.							
			Debtor				Relationship to you			
			District		Wh	nen	Case number, if known			
			Debtor				Relationship to you			
			District		Wh	nen	Case number, if known			
11.	Do you rent your residence?	■ No	Go to I	ine 12.						
	i coluctios :	☐ Ye	es. Has yo	our landlord obta	ained an eviction ju	dgment aga	ainst you and do you want to stay in your residence?			
				No. Go to line	12.					
				Yes. Fill out <i>In</i> bankruptcy per		ut an Evictio	ion Judgment Against You (Form 101A) and file it with	this		

Document Page 4 of 58 Case number (if known) Debtor 1 **Benjamin Washington** Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes.

Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

Part 4:

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

INO.	

Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Benjamin Washington

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Der	benjanin wasnin	gion									
Par	6: Answer These Quest	ions for Re	eporting Purposes								
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."								
			☐ No. Go to line 16b.								
			Yes. Go to line 17.								
		16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.								
			□ No. Go to line 16c.								
			☐ Yes. Go to line 17.								
		16c.	State the type of debts you	owe that are not consumer debts or busing	ness debts						
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapte	er 7. Go to line 18.							
	Do you estimate that after any exempt property is excluded and	☐ Yes.		. Do you estimate that after any exempt pravailable to distribute to unsecured credito	operty is excluded and administrative expenses rs?						
	administrative expenses		□ No								
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes								
18.	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000						
	you estimate that you owe?	☐ 50-99		☐ 5001-10,000	☐ 50,001-100,000						
	OWE:	100-19	-	□ 10,001-25,000	☐ More than100,000						
		□ 200-99	99								
19.	How much do you	□ \$0 - \$t	50,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion						
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion						
			001 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion						
		□ \$500,0	001 - \$1 million	Д \$100,000,001 - \$500 million	More than \$50 billion						
20.	How much do you	□ \$0 - \$ <u>\$</u>	50,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion						
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion						
			001 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion						
		□ \$500,0	001 - \$1 million	5 100,000,001 - \$500 million	i More than \$50 billion						
Par	7: Sign Below										
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.									
If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12 United States Code. I understand the relief available under each chapter, and I choose to proceed under											
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out document, I have obtained and read the notice required by 11 U.S.C. § 342(b).											
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.											
		y or property by fraud in connection with a 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519,									
			amin Washington In Washington	Signature of Deb	otor 2						
			of Debtor 1	3.g 3 6. 2 6.							
		Executed	on April 5, 2016	Executed on							
			MM / DD / YYYY		MM / DD / YYYY						

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Debtor 1 Benjamin Washington Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Richard	J. Oulton for America Law Group	Date	April 5, 2016
Signature of	Attorney for Debtor	_	MM / DD / YYYY
Richard J.	Oulton for America Law Group		
America L	aw Group, Inc. dba Debt Law Group		
Firm name			
America L	aw Group, Inc. dba Debt Law Group		
8501 Mayl	and Dr., Ste 106		
Henrico, V	'A 23294		
Number, Street,	City, State & ZIP Code		
Contact phone	804-308-0051	Email address	2debtlawgroup@gmail.com
29640			
Bar number & St	tate		

	Case 2	L6-31748-KRH	Doc 1	Filed 04 Docume		Entered 0 ae 8 of 58		.6:20:19) De	sc Main
Fill	in this informa	ation to identify your	case:	Docume	ш га	ue 6 01 36				
Deb	otor 1	Benjamin Washin	gton Middle N	Jame	Last N	ame				
	otor 2 use if, filing)	First Name	Middle N		Last N					
Unit	ted States Banl	kruptcy Court for the:	EASTERN I	DISTRICT OF	VIRGINIA					
1	e number			_						
(if kn	own)									ck if this is an nded filing
		<u>m 106Sum</u> Your Assets a	and Liahi	ilitiae an <i>t</i>	d Cartaii	n Statistic	al Inform	ation		40/45
		id accurate as possib							r supply	12/15 ing correct
info	rmation. Fill o	ut all of your schedule s, you must fill out a i	es first; then	complete the	information	on this form.	If you are fili			
Par	1: Summa	rize Your Assets								
										assets of what you own
1.	Schedule A/I 1a. Copy line	3: Property (Official Fo	orm 106A/B) om Schedule	A/B					\$	280,800.00
	1b. Copy line	62, Total personal prop	perty, from Scl	hedule A/B					\$	105,962.19
	1c. Copy line	63, Total of all property	on Schedule	A/B					\$	386,762.19
Par	Summa	rize Your Liabilities								
										liabilities nt you owe
2.		Creditors Who Have Cl total you listed in Colur					Part 1 of Sche	edule D	\$	273,008.00
3.		: Creditors Who Have total claims from Part					:/F		\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority (unsecured cla	ims) from lin	e 6j of <i>Schedul</i>	e <i>E/F.</i>		\$	145,842.18
							Your total	liabilities	\$	418,850.18
Par	t 3: Summa	rize Your Income and	Expenses							
4.		our Income (Official Fo		of Schedule I.					\$	6,423.00

Schedule J: Your Expenses (Official Form 106J) 5,187.13 Copy your monthly expenses from line 22c of Schedule J.....

Part 4: Answer These Questions for Administrative and Statistical Records

- Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - □ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Benjamin Washington

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9,482.95 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Tot	al claim
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	71,994.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	71,994.00

	Case	10-31/46-N	KH DOCI		eu 04/1 :ument		101110 10	.20.19	De:	SC Main
Fill	in this inforr	nation to identify	your case and th			raue 10 01 30		Ī		
	otor 1	•	•		•					
Den	וטו ו	Benjamin W First Name		e Name		Last Name				
Deb	otor 2									
(Spo	use, if filing)	First Name	Middle	e Name		Last Name				
Unit	ted States Ba	nkruptcy Court for	the: EASTERN	DISTRI	CT OF VI	RGINIA				
Cas	se number _									Check if this is an amended filing
		rm 106A/E e A/B: P ı	_							12/15
hink nfori insw	it fits best. B mation. If more ver every ques	e as complete and a e space is needed, tion.	accurate as possibl attach a separate sl	le. If two heet to ti	married po his form. C	e. If an asset fits in more than deople are filing together, both and the top of any additional page. Under the top of any additional page.	are equally resp	onsible for su	ipply	ing correct
	No. Go to Par Yes. Where is									
1.1				What	is the pro	perty? Check all that apply				
	5631 Dray	ton Landing Co	ourt		Single-fa	mily home	Do not dec	duct secured cla	aims	or exemptions. Put
	Street address,	if available, or other des	cription		•	r multi-unit building nium or cooperative				ms on Schedule D: ecured by Property.
					Manufact	tured or mobile home	Current v	alue of the	Cu	rrent value of the
	Chester	VA	23831-0000		Land		entire pro			rtion you own?
	City	State	ZIP Code			nt property	\$2	77,300.00	_	\$277,300.00
					Timeshar Other	re				wnership interest
				_		erest in the property? Check one	`	ee simple, ten te), if known.	ancy	by the entireties, or
				WIIO	Debtor 1		Fee Sin	•		
	Chesterfie	eld			Debtor 2	•		<u> </u>		
	County					and Debtor 2 only	<u>.</u> .			
						one of the debtors and another		k if this is con structions)	ımun	ity property
						on you wish to add about this	item, such as le	ocal		

Official Form 106A/B Schedule A/B: Property page 1

Valuation: Real Estate Tax Assessment

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Debto	or 1	enjamin wasning	gton		Casi	e number (if known)	
1.2	lf you ov	vn or have more	than one, list		t is the property? Check all that apply		
	746 Wilson St.				Single-family home	Do not deduct secure	d claims or exemptions. Put
_	Street addres	s, if available, or other des	scription		Duplex or multi-unit building		cured claims on Schedule D: Claims Secured by Property.
					Condominium or cooperative	Creditors who have t	лання Зесигей бу Рторену.
					Manufactured or mobile home		
	Petersbu	urg VA	23803-0000		Land	Current value of the entire property?	Current value of the portion you own?
-	City	State	ZIP Code		Investment property	\$3,500.0	0 \$3,500.00
					Timeshare	Describe the nature	of your ownership interest
					Other	(such as fee simple,	tenancy by the entireties, or
				Who	has an interest in the property? Check one	a life estate), if know	m.
	_			_	Debtor 1 only	Fee Simple	
_	Petersbu	urg City		_	,		
	County				Debtor 1 and Debtor 2 only	☐ Check if this is	community property
					At least one of the debtors and another	(see instructions)	······, p
					r information you wish to add about this ite erty identification number:	m, such as local	
					uation: Real Estate Tax Assessme	·m4	
some	u own, le one else d		vehicle, also rep	port it on	ony vehicles, whether they are register Schedule G: Executory Contracts and Uni prcycles		y vehicles you own that
	No	•	·		·		
_	Yes						
3.1	Make:	Mercedes-Benz	•	Who has	an interest in the property? Check one	Do not deduct secure	ed claims or exemptions. Put
0.1	Model:	E320 CDI		■ Debtor	, , ,		cured claims on Schedule D: Claims Secured by Property.
	Year:	2005		■ Debtor	•		
		ate mileage:	102.467	_	2 only 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other info				one of the debtors and another		, ,
	Valuation	on: NADA Clean					
					if this is community property tructions)	\$11,825.0	0 \$11,825.00
3.2	Make:	Mercedes Benz		_	an interest in the property? Check one	the amount of any see	ed claims or exemptions. Put cured claims on <i>Schedule D</i> :
	Model:	CLK 320 Coupe		Debtor	•	Creditors Who Have	Claims Secured by Property.
	Year:	2005		Debtor	•	Current value of the	
		ate mileage:	110,692	_	1 and Debtor 2 only	entire property?	portion you own?
	Other info		Detail		one of the debtors and another		
	vaiuatio	on: NADA Clean	Retail		if this is community property	\$8,225.0	0 \$8,225.00

Official Form 106A/B Schedule A/B: Property page 2

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Debte	or 1	Benjamin Wa	ashington	Ca	se number (if known)	
3.3		Saturn SL1 2000 mate mileage:	170,387	Who has an interest in the property? Check one ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	the amount of any se	ed claims or exemptions. Put ecured claims on Schedule D: Claims Secured by Property. e Current value of the portion you own?
	Valuat	tion: NADA	Clean Retail	☐ Check if this is community property (see instructions)	\$2,175.0	\$2,175.00
3.4	Other in	Mercedes S Class S 2003 mate mileage: iformation: NADA		Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property	the amount of any se	portion you own?
3.5	Other in	Ford F150 1997 mate mileage: offormation: tion: NADA	199,646 Clean Retail	Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	the amount of any se	portion you own?
Exa ■	amples: E No Yes	Soats, trailers,	motors, personal wa	d other recreational vehicles, other vehicles, and tercraft, fishing vessels, snowmobiles, motorcycle a notorcycle and the state of the	ccessories	404.000.00
.pa	_		ed for Part 2. Write to a series and Household Ite	that number here	=>	\$34,300.00
				terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>E</i> >	<i>(amples:</i> No	I goods and for Major appliant	urnishings ces, furniture, linens	, china, kitchenware		
			_	t, Living room set, Bedroom set, Kitchen kware, utensils, Linens		\$595.00
E>	No	Televisions ar including cell		eo, stereo, and digital equipment; computers, printer ledia players, games	rs, scanners; music col	lections; electronic devices
	Yes. De	escribe	3 laptops, 2 flat	screen TVs		\$500.00
			1 1 1 1 1 2 7 2 1 1 1 1 1	-		

Official Form 106A/B

Case 16-31748-KRH Doc 1 Filed 04/07/16 Entered 04/07/16 16:20:19 Document Page 13 of 58 Case number (if known) Debtor 1 **Benjamin Washington** 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment □ No Yes. Describe..... 12 gauge shotgun - \$85 \$185.00 .9mm Taurus pistol - \$100 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$500.00 Man's and woman's personal wardrobes 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$100.00 Assorted watches and rings \$125.00 Man's and woman's wedding bands 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,005.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own?

Do not deduct secured claims or exemptions.

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ Yes.....

Case 16-31748-KRH Doc 1 Filed 04/07/16 Entered 04/07/16 16:20:19 Document Page 14 of 58 Debtor 1 **Benjamin Washington** Case number (if known) 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... Checking & \$0.00 Savings Wells Fargo 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

□ No

Yes. List each account separately.

Type of account: Institution name:

Savings Plan FERS Thrift Savings Plan \$69,657.19

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No
□ Yes...... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1)

No

☐ Yes...... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

□ No

Yes. Give specific information about them...

177 Staunton River Rd.
Clarksville, VA 23927
Life estate for Vernell Harper
Benjamin Washington listed as second recipient
RE Tax Assessment: \$87,900

\$0.00

Case 16-31748-KRH Doc 1 Filed 04/07/16 Entered 04/07/16 16:20:19 Document Page 15 of 58 Case number (if known) Debtor 1 **Benjamin Washington** 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: **FEGLI Term Life Insurance through** Janice Washington \$0.00 Employer - no cash value AGLI Term Life Insurance - no cash Janice Washington \$0.00 value 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim.......

Official Form 106A/B Schedule A/B: Property page 6

35. Any financial assets you did not already list

■ No

Case 16-31748-KRH Doc 1 Filed 04/07/16 Entered 04/07/16 16:20:19 Document Page 16 of 58 Case number (if known) Debtor 1 **Benjamin Washington** ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$69,657.19 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$280,800.00 Part 2: Total vehicles, line 5 \$34.300.00 Part 3: Total personal and household items, line 15 57. \$2,005.00 Part 4: Total financial assets, line 36 \$69,657.19 59. Part 5: Total business-related property, line 45 \$0.00

\$0.00

\$0.00

Copy personal property total

\$105,962.19

63. Total of all property on Schedule A/B. Add line 55 + line 62

Part 6: Total farm- and fishing-related property, line 52

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

61.

\$386,762.19

\$105,962.19

Official Form 106A/B Schedule A/B: Property page 7

		Dodding	THE TAGE IT OF OU	
Fill in this inform	nation to identify your	case:		
Debtor 1	Benjamin Washir	ngton		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
Case number _				☐ Chec
				amer

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2005 Mercedes Benz CLK 320 Coupe 110.692 miles	\$8,225.00		\$6,000.00	Va. Code Ann. § 34-26(8)
Valuation: NADA Clean Retail Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
2003 Mercedes Benz S Class S500 104,738 miles	\$8,075.00		\$5,000.00	Va. Code Ann. § 34-4
Valuation: NADA Clean Retail Line from Schedule A/B: 3.4			100% of fair market value, up to any applicable statutory limit	
Dining room set, Living room set, Bedroom set, Kitchen appliances,	\$595.00		\$595.00	Va. Code Ann. § 34-26(4a)
cookware, utensils, Linens Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit	
3 laptops, 2 flatscreen TVs	\$500.00		\$500.00	Va. Code Ann. § 34-26(4a)
Ellio Holli Govedale / V.Z. 111			100% of fair market value, up to any applicable statutory limit	
12 gauge shotgun - \$85 .9mm Taurus pistol - \$100	\$185.00		\$185.00	Va. Code Ann. § 34-26(4b)
Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Benjamin Washington Case number (if known)

Brief description of the property and line on Schedule A/B that lists this property		Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
Man's ai	nd woman's personal	\$500.00	•	\$500.00	Va. Code Ann. § 34-26(4)	
	Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit		
	nd woman's wedding bands Schedule A/B: 12.2	\$125.00	•	\$125.00	Va. Code Ann. § 34-26(1a)	
Line nom	Gonedale AVD. 12.2			100% of fair market value, up to any applicable statutory limit		
Savings Plan	Plan: FERS Thrift Savings	\$69,657.19		\$69,657.19	Va. Code Ann. § 34-34	
	Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit		

	Document	Page 19 (of 58		
Fill in this information to identify yo	our case:				
Debtor 1 Benjamin Was	hington				
Debtor 1 Benjamin Was First Name	Middle Name	Last Name		-	
Debtor 2					
(Spouse if, filing) First Name	Middle Name	Last Name		=	
United States Bankruptcy Court for the	e: EASTERN DISTRICT OF VIRGI	NIA			
Officed States Barkruptcy Court for the	e. LAGILINI DIGINIOT OF VINO			-	
Case number					
(if known)				☐ Check	if this is an
				ameno	led filing
O#:-:-! F 400D					
Official Form 106D					
Schedule D: Creditor	s Who Have Claims S	Secured	by Propert	У	12/15
					16
Be as complete and accurate as possible is needed, copy the Additional Page, fill i					
number (if known).			. ,	, , ,	
1. Do any creditors have claims secured	by your property?				
☐ No. Check this box and submit	this form to the court with your other s	chedules. You	have nothing else	to report on this form.	
Yes. Fill in all of the information	n below.				
	. Bolow.				
Part 1: List All Secured Claims			Column A	Column B	Column C
List all secured claims. If a creditor has for each claim. If more than one creditor has	s more than one secured claim, list the cred		Amount of claim	Value of collateral	Unsecured
	etical order according to the creditor's name		Do not deduct the	that supports this	portion
2.4 Sun West Martgage Co.I	Decaribe the wrongets that accounce the		value of collateral.	claim	If any
2.1 Sun West Mortgage Co I Creditor's Name	Describe the property that secures the	e ciaim:	\$254,573.00	\$277,300.00	\$0.00
Oreattor 3 Name	5631 Drayton Landing Court Chester, VA 23831 Chesterfi	old			
	County	eiu			
	Valuation: Real Estate Tax				
	Assessment				
18303 Gridley Rd	As of the date you file, the claim is: C	heck all that			
Cerritos, CA 90703	apply. Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
rambol, chool, chy, chao a zip code	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	☐ An agreement you made (such as m	ortgage or secur	ed		
Debtor 2 only	car loan)	3.3.			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mech	nanic's lien)			
☐ At least one of the debtors and another					
☐ Check if this claim relates to a		Deed of Trus	st		
community debt					
Onemad					
Opened 7/01/15					
Last Active					
Date debt was incurred 2/02/16	Last 4 digits of account number	er 0382			
					
2.2 Va Credit Union	Describe the property that secures the	e claim:	\$18,435.00	\$11,825.00	\$6,610.00
Creditor's Name	2005 Mercedes-Benz E320 CI				
	102,467 miles	-			
	Valuation: NADA Clean Reta	il			
PO Box 90010	As of the date you file, the claim is: C apply.	heck all that			
Richmond, VA 23225	☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as m	ortgage or secur	ed		
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mech	nanic's lien)			

Official Form 106D

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on	Case number (if know)		
dle Name Last Name			
ner	Purchase Money Security		
• •	mber <u>3861</u>		
• •	φ=: 0,000:00		
d ir	ive Last 4 digits of account nur in Column A on this page. Write that nur	ive Last 4 digits of account number Last Name Last Name Purchase Money Security Purchase Money Security	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in t	his inform	ation to identify your o		cument Pa	age 21	of 58			
Debtor	1	Benjamin Washin	aton						
Debtor	2	First Name	Middle Name	Last	t Name				
(Spouse i		First Name	Middle Name	Last	t Name				
United	States Ban	kruptcy Court for the:	EASTERN DIST	TRICT OF VIRGINIA					
Case n (if known)								_	Check if this is an amended filing
		106E/F F: Creditors W	ho Have Uı	nsecured Cla	ims				12/15
any exec Schedule Schedule left. Atta	eutory contra e G: Executo e D: Creditor ch the Conti d case num	acts or unexpired leases ory Contracts and Unexpires Who Have Claims Section inuation Page to this pag ber (if known).	that could result ir ired Leases (Officia ured by Property. It e. If you have no ir	n a claim. Also list exe al Form 106G). Do not f more space is neede	ecutory co include a ed, copy tl	ontracts or any credito he Part you	n Schedule A/B: Prop rs with partially sec u need, fill it out, nur	perty (Offic ured claims nber the en	that are listed in tries in the boxes on the
1. Do	any creditor	s have priority unsecured	d claims against yo	ou?					
	No. Go to Pa	rt 2.							
	Yes.								
Part 2:	List All	of Your NONPRIORIT	Y Unsecured Cla	aims					
	No. You have	s have nonpriority unsec	art. Submit this form	to the court with your o					
uns	ecured claim n one creditor	nonpriority unsecured cla , list the creditor separately r holds a particular claim, li	for each claim. For	each claim listed, identi	tify what ty	pe of claim	it is. Do not list claim	s already ind	cluded in Part 1. If more
									Total claim
4.1	Amex		Las	st 4 digits of account n	number	2833			\$1,848.00
	Correspo PO Box 9	981540	Wh	en was the debt incur	red?	Opened 3/18/16	d 8/01/14 Last /	Active	
	Number Str	eet City State Zlp Code ed the debt? Check one.	As	of the date you file, the	ne claim is	s: Check all	that apply		
	Debtor 1	only		Contingent					
	Debtor 2	2 only		Unliquidated					
		and Debtor 2 only	_	Disputed					
	☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:								
	_	f this claim is for a comm		Student loans					
	debt	n subject to offset?		Obligations arising out o	of a separ	ation agree	ement or divorce that y	you did not	
	■ No		_	Debts to pension or pro	ofit-sharing	g plans, and	d other similar debts		
	☐ Yes			Other. Specify Cred	lit Card				

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Benjamin Washington Case number (if know)

Denioi	Denjamin washington		Case Humber (II know)				
4.2	Bank Of America	Last 4 digits of account number	7561	\$4,010.00			
	Nonpriority Creditor's Name Nc4-105-03-14 PO Box 26012 Greensboro, NC 27410 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim in	Opened 11/01/14 Last Active 2/27/16				
	Who incurred the debt? Check one.	,	,				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	<u> </u>				
4.3	Chase Card Services	Last 4 digits of account number	3214	\$3,348.00			
	Nonpriority Creditor's Name Attn: Correspondence Dept PO Box 15298	When was the debt incurred?	Opened 11/01/15 Last Active 1/17/16				
	Wilmington, DE 19850 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	•					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharin					
	Yes	Other. Specify Credit Card	<u> </u>				
4.4	Heart Care Associates Nonpriority Creditor's Name	Last 4 digits of account number	2261	\$358.86			
	5303 Plaza Dr. Suite 102	When was the debt incurred?	7/2015				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	Debtor 1 only	По ::					
	Debtor 2 only	☐ Contingent					
	Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed					
	■ At least one of the debtors and another	Type of NONPRIORITY unsecured	PRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	rration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	□Yes	Other, Specify Medical					

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Benjamin Washington Case number (if know)

Debtor	1 Benjamin Washington		Case number (if know)	
4.5	Lending Club Corp Nonpriority Creditor's Name	Last 4 digits of account number	6187	\$32,139.00
	71 Stevenson St Suite 300 San Francisco, CA 94105	When was the debt incurred?	Opened 5/01/15 Last Active 2/22/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4.6	Nc Financial Nonpriority Creditor's Name	Last 4 digits of account number	3348	\$6,454.00
	200 W Jackson Blvd Ste 2 Chicago, IL 60606	When was the debt incurred?	Opened 3/01/15 Last Active 3/14/16	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sena	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Unsecured		
4.7	U.S. Dept of Agriculture Nonpriority Creditor's Name	Last 4 digits of account number	1780	\$2,777.32
	Military Deposit & Reconciliat P.O. Box 61081	When was the debt incurred?	unknown	
	New Orleans, LA 70161			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	■ Debtor 1 only	Пол		
	_	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	_	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□ Yes	■ Other Specify Loan repay		
	□ 169	Other. Specify Loan repay	mont	

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Case number (if know)

Debtor	1 Benjamin Washington		Case number (if know)				
4.8	Us Dept of Ed Nonpriority Creditor's Name	Last 4 digits of account number	9581	\$67,494.00			
	Great Lakes Educational Loan 2401 International Madison, WI 53704	When was the debt incurred?	Opened 3/01/10 Last Active 1/04/16				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	□Yes	☐ Other. Specify					
		Student Lo					
4.9	Us Dept of Ed Nonpriority Creditor's Name	Last 4 digits of account number	8581	\$4,500.00			
	Great Lakes Educational Loan 2401 International Madison, WI 53704	When was the debt incurred?	Opened 9/01/14 Last Active 2/29/16				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	_					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:				
	At least one of the debtors and another	Student loans					
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	■ No	☐ Debts to pension or profit-sharin					
	☐ Yes	Other. Specify Student Lo					
		Student Lo	all				
4.1 0	Virginia Credit Union Nonpriority Creditor's Name	Last 4 digits of account number	<u>0711</u>	\$21,842.00			
	PO Box 90010 Richmond, VA 23225-9010	When was the debt incurred?	Opened 3/01/12 Last Active 3/14/16				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	_					
	Debtor 1 only	Contingent					
	Debtor 2 only	Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	No	Debts to pension or profit-sharir	o plans, and other similar debts				
	☐ Yes	■ Other. Specify Credit Card					
	— 163	Other, Specify Other Cart	•				

	Debtor 1	1 Benjam	in Washington	——————————————————————————————————————	Case r	number (if know)		
1612 Higguenot Rd Midothian, VA 23113 Number Street City State 2ip Code Who incurred the debt? Check one. Debtor 1 only Uniquidated Debtor 2 only Uniquidated Debtor 3 only Uniquidated Debtor 3 only Debtor 3		•		Last 4 digits of account numbe	_r 8310)		\$1,071.00
Number Streed City State 2(p Code Who incurred the debt9? Check one. Debtor 1 only		1612 Huguenot Rd		When was the debt incurred?	11/17	7/2015		
Debtor 1 celly Contingent				As of the date you file, the claim	n is: Chec	k all that apply		
Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Disputed Disputed Debtor 1 and Debtor 2 only Disputed Disputed Disputed Debtor 1 and Debtor 2 only Disputed Disputed Disputed Disputed Debtor 1 and Debtor 2 only Disputed Disputed Disputed Disputed Debtor 1 and Debtor 2 only Disputed Disputed Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 apparent 3 or 2 only Debtor 3 apparent 3 or 2 only Debtor 4 apparent 3 or 2 only De		Who incurre	d the debt? Check one.					
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Chilipations arising out of a separation agreement or divorce that you did not report as priority claims No		☐ At least or	ne of the debtors and another	Type of NONPRIORITY unsecur	red claim:			
Debts to pension or profit-sharing plans, and other similar debts Medical		debt	·	☐ Obligations arising out of a se	paration aç	greement or divord	ce that you did not	
Yes Domestic Specify Medical			subject to offset?	<u> </u>				
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Les this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the oblection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then the side in Parts 1 or 2, then the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, then the debts that you list the original creditor? Great Lakes Educational Loans 2401 International Lane Madison, WI 53704 Last 4 digits of account number Name and Address Net Credit 200 W Jackson Blvd Suite 2400 Chicago, IL 60606 Last 4 digits of account number Add the Amounts for Each Type of Unsecured Claims Last 4 digits of account number Last 4 digits of account num		☐ Yes		Other. Specify Medical				
is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 of 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 of 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address Name and Address Con which entry in Part 1 or Part 2 did you list the original creditor? International Lane Madison, WI 53704 Name and Address Net Credit 200 W Jackson Blvd Suite 2400 Chicago, IL 60606 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.6 of (Check one): Part 1: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60606 Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claims Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claims. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claims. Total Claim 6a. Domestic support obligations 6a. \$ 0.00 Other. Add all other priority unsecured claims. Write that amount here. 6b. \$ 0.00 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. Student loans 6f. Student loans or profit-sharing plans, and other similar debts 6f. Student loans 6f. Student loans 6f. Student loans 6f. Student loans 6f. Student	Part 3:	List Othe	ers to Be Notified About a De	ebt That You Already Listed				
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		6i	Other. Add all other nonpriority	y unsecured claims. Write that amount	6i.	•		

Total Nonpriority. Add lines 6f through 6i.

145,842.18

		Bodanie	711	
Fill in this infor	mation to identify your	case:		
Debtor 1	Benjamin Washir	ngton		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	OF VIRGINIA	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Chesterfield MiniStorage 11320 Iron Bridge Rd. Chester, VA 23831	Storage. Debtor intends to honor current contract.
2.2	Verizon 500 Technology Dr Ste 30 Weldon Spring, MO 63304	Cable, Internet, Phone. Debtors intend to honor current contract.
2.3	Verizon Wireless	Cell. Debtors intend to honor current contract.

		Docume	nt Page 27 o	<u>f 58</u>
Fill in this i	information to identify your	case:		
Debtor 1	Benjamin Washi	ngton		
Dahtar 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name	
United State	es Bankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
Case numb	per			
(if known)				☐ Check if this is an amended filing
Official	Form 106H			
	ule H: Your Coc	lehtors		12/15
ociica	die II. Tour cou	icbioi 3		12/13
people are fill it out, an	filing together, both are equ	ally responsible for supper boxes on the left. Attach). Answer every question.	lying correct informati the Additional Page to	s complete and accurate as possible. If two married ion. If more space is needed, copy the Additional Page, o this page. On the top of any Additional Pages, write as a codebtor.
	•	, , , , , ,	•	
■ No □ Yes				
	iin the last 8 years, have yo a, California, Idaho, Louisiana			y? (Community property states and territories include ngton, and Wisconsin.)
`	Go to line 3. Did your spouse, former spo	use or logal equivalent live	with you at the time?	
□ res.	. Dia your spouse, former spo	use, or legal equivalent live	with you at the time!	
in line : Form 1	2 again as a codebtor only	if that person is a guarant	or or cosigner. Make s	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 6G). Use Schedule D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor lame, Number, Street, City, State and 2	IIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street			_
C	City	State	ZIP Code	
3.2				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
N	Number Street			_

State

City

ZIP Code

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							_				
	in this information to identif	, ,	se: ashington								
Del	otor 2										
	ted States Bankruptcy Cou	rt for the:	EASTERN DISTRICT	OF VIRGINIA							
	se number						ПА	k if this is: n amende suppleme	ed filing	wing postpetition	n chapter
\bigcirc	fficial Form 106	ı					1:	3 income	as of the	e following date	: :
	chedule I: You	_	ame.				M	IM / DD/ Y	YYY		12/15
sup spo atta	as complete and accurate plying correct information use. If you are separated ch a separate sheet to thi	n. If you a and you s form. 0	are married and not filing wi	ng jointly, and yo th you, do not in	our spouse nclude infor	is liv mati	ing with on about	you, incl	ude info ouse. If	ormation abou more space is	t your needed,
1.	Fill in your employment information.	:		Debtor 1				Debtor 2	2 or non	n-filing spouse	•
	If you have more than one			■ Employed				☐ Emple	oyed		
	attach a separate page w information about addition		Employment status	☐ Not employe	ed			■ Not e	mployed	d	
	employers.		Occupation	Equal Oppor	tunity Spe	ес					
	Include part-time, season self-employed work.	al, or	Employer's name	US Departme	ent of Lab	or					
	Occupation may include sor homemaker, if it applie		Employer's address	170 S. Indep West, Suite (Philadelphia	600						
			How long employed the	nere? <u>22 y</u>	ears			_			
Par	t 2: Give Details Ab	out Mon	thly Income								
	mate monthly income as use unless you are separate		te you file this form. If	you have nothing	to report for	any	line, write	\$0 in the	space.	Include your no	on-filing
	u or your non-filing spouse e space, attach a separate			ombine the inform	ation for all	empl	oyers for	that perso	on the	e lines below. If	you need
							For Dek	otor 1		Debtor 2 or filing spouse	
2.	List monthly gross wag deductions). If not paid m				2.	\$	6	,474.00	\$	0.00	 -
3.	Estimate and list month	ıly overti	me pay.		3.	+\$		0.00	+\$	0.00	_
1	Calculate gross Income	Add lin	o 2 1 lino 2		1	Φ	6 47	74.00	•	0.00	

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Debt	tor 1	Benjamin Washington	_	Case	number (if known)			
					Debtor 1	For Debte	gspouse	
	Cop	y line 4 here	4.	\$_	6,474.00	\$	0.00	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	1,021.00	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	842.00	\$	0.00	
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c. 5d.	\$_ \$	52.00	\$ \$	0.00	
	5u. 5e.	Insurance	5u. 5e.	\$ _	88.00 516.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify: Fegli	5h.+	\$_	27.00	+ \$	0.00	
		Vis	_	\$_	33.00	\$	0.00	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	2,579.00	\$	0.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	3,895.00	\$	0.00	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$_	0.00	\$	0.00	
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c. 8d.	\$_ \$_	0.00	\$ \$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	
	8f. 8g. 8h.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: VA Benefits Prorated tax refund	8f. 8g. 8h.+	\$ \$ \$	0.00 0.00 2,122.00 406.00	\$ \$ + \$	0.00 0.00 0.00 0.00	
		Trotated tax retains			400.00		<u> </u>	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,528.00	\$	0.00	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$_		6,423.00 + \$_	0.0	0 = \$6	5,423.00
11.	Incli othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depend		•	ed in <i>Sched</i>	ule J. . +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certallies						5,423.00
13.	Do :	you expect an increase or decrease within the year after you file this form	ı?				Combine monthly i	
		No. Yes Explain:						

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Fills	in this informa	ation to identify yo	our case:			1		
Deb		Benjamin W		n		Chec	ck if this is:	
Deb	tor 2							wing postpetition chapter
(Spc	ouse, if filing)						13 expenses as of	the following date:
Unite	ed States Bankr	ruptcy Court for the	: EASTE	RN DISTRICT OF VIRGIN	IIA	-	MM / DD / YYYY	
	e numbe r nown)							
Of	fficial Fo	orm 106J						
		J: Your						12/1
info	rmation. If m		eded, atta	. If two married people ar ich another sheet to this n.				
Part		ribe Your House	hold					
1.	Is this a joir							
	■ No. Go to		in a separ	ate household?				
	□ м		•					
	ΠY	es. Debtor 2 mus	st file Offic	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Deb	tor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Daughter			Yes
								□ No □ Yes
								□ No
								☐ Yes
								□ No
3.	Do your eyr	penses include	_					☐ Yes
٥.	expenses o	f people other t	han $_{\sqsubset}$	No				
	yourself and	d your depende	nts? □	Yes				
		ate Your Ongoi						
exp	imate your ex enses as of a blicable date.	a date after the l	our bankr bankrupto	uptcy filing date unless y y is filed. If this is a supp	ou are using this f plemental <i>Schedule</i>	orm as a su e <i>J</i> , check th	pplement in a Cha e box at the top o	apter 13 case to report of the form and fill in the
the	•	h assistance an		government assistance i	•		Your exp	enses
(011	iloiai i Oilli i i	701.)						
4.		or home owners and any rent for th		ses for your residence. I or lot.	nclude first mortgag	e 4. \$	·	1,453.00
	If not include	ded in line 4:						
	4a. Real e	estate taxes				4a. \$	i	0.00
	•	erty, homeowner's				4b. \$		0.00
				ıpkeep expenses		4c. \$		120.00
5.		owner's associat		dominium dues our residence, such as ho	ime equity loans	4d. \$ 5. \$		48.40 0.00
υ.	Auditional	igage payiii	IUI Y	rai rooiaonoo, suun as 110	THE EQUILY IDAMS	J. 4	•	U.UU

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Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection	6a.	Φ.	
•	6a.	Φ.	
6h Water sewer garbage collection	Ju.	Э	349.00
ob. Water, sewer, garbage concenter	6b.	\$	90.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	432.00
6d. Other. Specify: Garbage	6d.	\$	18.50
Ironbridge Property Owner's Assoc		\$	8.00
Food and housekeeping supplies	7.	\$	800.00
. •	8.	\$	0.00
Clothing, laundry, and dry cleaning	9.	\$	150.00
		·	150.00
		· ·	120.00
Transportation. Include gas, maintenance, bus or train fare.		*	
	12.	\$	400.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	120.00
Charitable contributions and religious donations	14.	\$	0.00
, , ,		_	
		*	108.73
			0.00
15c. Vehicle insurance			318.00
	15d.	\$	17.50
	4.0	•	
	16.	\$	80.00
	47-	Φ.	0.00
		·	0.00
		·	0.00
17c. Other. Specify: MiniStorage		·	104.00
		\$	0.00
		\$	0.00
	6i). 10:		250.00
	10	Ψ	230.00
	_	our Income	
			0.00
		·	0.00
		·	0.00
·		·	0.00
		·	0.00
			50.00
Emergency runus		-Ψ	50.00
Calculate your monthly expenses			
22a. Add lines 4 through 21.		\$	5,187.13
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J	J-2	\$	
22c. Add line 22a and 22b. The result is your monthly expenses.		\$	5,187.13
			<u> </u>
	00 -	¢.	0.400.00
		·	6,423.00
23b. Copy your monthly expenses from line 22c above.	23b.	-\$	5,187.13
23c Subtract your monthly expenses from your monthly income			
	23c.	\$	1,235.87
Do you expect an increase or decrease in your expenses within the year after	er you file this	form?	ase or decrease because of a
■ No.			
	Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance. Specify: Veteran's Group Life Insurance 15d. Other insurance. Specify: Veteran's Group Life Insurance Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Personal property Tax Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: MiniStorage 17d. Other. Specify: MiniStorage 17d. Other. Specify: MiniStorage 17d. Other payments of alimony, maintenance, and support that you did not report deducted from your pay on line 5, Schedule I, Your Income (Official Form 10 Other payments you make to support others who do not live with you. Specify: Assistance to elderly uncle Other real property expenses not included in lines 4 or 5 of this form or on 5 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues Other: Specify: Emergency funds Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106. 22c. Add line 22a and 22b. The result is your monthly expenses. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. Do you expect an increase or decrease in your expenses within the year after	Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services 110. Medical and dental expenses 111. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle 15c. Vehicle insurance	Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses 11. \$ Medical and dental expenses 11. \$ Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Veteran's Group Life Insurance 17a. Car payments for Vehicle 1 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: MiniStorage 17d. Other. Specify: MiniStorage 17d. Other. Specify: Nomen, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments on the support others who do not live with you. Specify: Assistance to elderly uncle 20a. Mortgages on other property 20b. Seal estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 21d. Homeowner's association or condominium dues 22e. Homeowner's association or condominium dues 22e. Homeowner's association or condominium dues 23a. Capy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 23c. Capy line 12 (your combined monthly income) from Schedule I. 23a. Capy line 12 (your combined monthly income) from Schedule I. 23a. Capy line 12 (y

page 2

Official Form 106J

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Fill in this info	amotion to identify your				
	ormation to identify your				
Debtor 1	Benjamin Washin	Middle Name	Last Name	e	
Debtor 2	. not reamo	madio Name	<u> Laot Ham</u>		
(Spouse if, filing)	First Name	Middle Name	Last Name	 ə	
United States	Bankruptcy Court for the:	EASTERN DISTRICT	OF VIRGINIA		_
Case number					
(if known)					☐ Check if this is an amended filing
If two married You must file t obtaining mon		r, both are equally resp le bankruptcy schedule n connection with a bar	onsible for supply	ying correct information	
s	ign Below				
Did you	pay or agree to pay some	one who is NOT an atte	orney to help you	fill out bankruptcy for	ms?
■ No					
☐ Yes	Name of person				ch Bankruptcy Petition Preparer's Notice, laration, and Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the su	mmary and sched	lules filed with this dec	claration and
X /s/ B	enjamin Washington		X		
Benj	amin Washington ture of Debtor 1		Sigr	nature of Debtor 2	
Date	April 5, 2016		Date	e	

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Fill	in this inforn	nation to identify you	r case:			
Del	otor 1	Benjamin Washi				
	otor 2	First Name	Middle Name Middle Name	Last Name Last Name		
Uni	ted States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA		
		, ,				
	se number				_	heck if this is an mended filing
Sta		of Financial	Affairs for Individ			4/16
info num	rmation. If m	ore space is needed, n). Answer every que	attach a separate sheet to stion.	this form. On the top of any	equally responsible for sup y additional pages, write you	
Par 1.		etails About Your Ma r current marital statu	arital Status and Where You us?	Lived Before		
	■ Married□ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than v	where you live now?		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					ity property state or territory	
	■ No □ Yes. Ma	ike sure you fill out <i>Scl</i>	hedule H: Your Codebtors (Of	ficial Form 106H).		
Par	t 2 Explai	n the Sources of You	ır Income			
4.	Fill in the total	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	Ill businesses, including part-		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	•	of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$20,772.80	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Benjamin Washington

				Debtor 1				Debtor 2		
				Sources of inco		Gross income (before deductions an exclusions)		Sources of incontrol of the control		Gross income (before deductions and exclusions)
	last calen nuary 1 to		31, 2015)	■ Wages, comr bonuses, tips	nissions,	\$59,283.0	_	☐ Wages, componuses, tips	missions,	
				Operating a b	ousiness		[Operating a	business	
	the calend nuary 1 to			■ Wages, common was well wages, tips	nissions,	\$59,100.0	_	☐ Wages, componuses, tips	missions,	
				Operating a b	ousiness		[Operating a l	business	
5.	Include include and other winnings. List each s	come regard public bene If you are fil	dless of wheth fit payments; ing a joint cas the gross inco	ner that income is to pensions; rental in se and you have in	axable. Exam come; interes come that yo	previous calendar yea nples of other income a st; dividends; money co u received together, list y. Do not include incom	re alimo ollected t it only	from lawsuits; once under De	royalties; and btor 1.	
				Debtor 1				Debtor 2		
				Sources of inco	me	Gross income from each source (before deductions an exclusions)	5	Sources of inco Describe below.		Gross income (before deductions and exclusions)
	m January date you f		nt year until nkruptcy:	Veterans Bene	efits	\$8,488.0	00			
	r last calen nuary 1 to		31, 2015)	Veterans Bene	efits	\$25,464.0	00			
	the calend nuary 1 to			Veterans Bend	efits	\$25,464.0	00			
Par	rt 3: List	Certain Pa	ıvments You	Made Before You	ı Filed for Ba	ankruptcv				
			,							
6.		Neither D	ebtor 1 nor D	's debts primarily Debtor 2 has prim Dersonal, family,	arily consum	ner debts. Consumer d	debts ar	re defined in 11	U.S.C. § 101	(8) as "incurred by an
		_	•	•	nkruptcy, did	you pay any creditor a	total of	\$6,425* or mor	e?	
		□ _{No.} □ _{Yes}	Go to line 7 List below 6		om vou paid	a total of \$6,425* or mo	ore in o	ne or more pav	ments and th	e total amount vou
			paid that cre not include	editor. Do not inclupayments to an at	ide payments torney for this	for domestic support of bankruptcy case. after that for cases filed	obligatio	ons, such as ch	ild support ar	
	Yes.			or both have prima	-	ner debts. you pay any creditor a	total of	\$600 or more?		
		□ _{No.}	Go to line 7							
		■ Yes	List below e include pay	each creditor to wh	c support obli	a total of \$600 or more gations, such as child s				
	Creditor'	s Name an	d Address	Date	s of payment	Total amount		Amount you still owe	Was this p	ayment for

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Debtor 1 Benjamin Washington

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Net Credit 200 W Jackson Blvd Suite 2400 Chicago, IL 60606	Jan - March 2016	\$1,500.00	\$6,449.61	 ☐ Mortgage ☐ Car ☐ Credit Card ■ Loan Repayment ☐ Suppliers or vendors ☐ Other
Lending Club 71 Stevenson St. Suite 300 San Francisco, CA 94105	Jan - March 2016	\$3,130.00	\$31,787.00	☐ Mortgage ☐ Car ☐ Credit Card ■ Loan Repayment ☐ Suppliers or vendors ☐ Other
Sun West Mortgage Co I 18303 Gridley Rd Cerritos, CA 90703	Jan - March 2016	\$4,359.00	\$254,573.00	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
Within 1 year before you filed for bankru Insiders include your relatives; any general of which you are an officer, director, person a business you operate as a sole proprietor alimony. No	partners; relatives of any ger in in control, or owner of 20% of	neral partners; partners partners or more of their votin	erships of which yog g securities; and a	ou are a general partner; corporating managing agent, including one
Insiders include your relatives; any general of which you are an officer, director, person a business you operate as a sole proprietor alimony.	partners; relatives of any ger in in control, or owner of 20% of	neral partners; partners more of their votin tyments for domestic Total amount	erships of which yog securities; and a c support obligation Amount you	ou are a general partner; corporating managing agent, including one
Insiders include your relatives; any general of which you are an officer, director, person a business you operate as a sole proprietor alimony. No Yes. List all payments to an insider.	partners; relatives of any ger n in control, or owner of 20% or r. 11 U.S.C. § 101. Include pa	neral partners; partnor or more of their votin syments for domestic	erships of which yog g securities; and a c support obligation	ou are a general partner; corporati ny managing agent, including one ns, such as child support and
Insiders include your relatives; any general of which you are an officer, director, person a business you operate as a sole proprietor alimony. No Yes. List all payments to an insider. Insider's Name and Address Horace Drake Manor Care Facility Within 1 year before you filed for bankruinsider? Include payments on debts guaranteed or company to the company to	partners; relatives of any ger in control, or owner of 20% or r. 11 U.S.C. § 101. Include pa Dates of payment June 2015 - current	reral partners; partners more of their voting ments for domestic syments for domestic syments for domestic syments for domestic syments for domestic symbol	erships of which yog securities; and a c support obligation Amount you still owe \$0.00	Reason for this payment Help & support of elderly relatives (Debtor's wife's uncle)
Insiders include your relatives; any general of which you are an officer, director, person a business you operate as a sole proprietor alimony. No Yes. List all payments to an insider. Insider's Name and Address Horace Drake Manor Care Facility Within 1 year before you filed for bankruinsider? Include payments on debts guaranteed or comments.	partners; relatives of any ger in control, or owner of 20% or r. 11 U.S.C. § 101. Include pa Dates of payment June 2015 - current	Total amount paid \$3,000.00	erships of which yog securities; and a c support obligation Amount you still owe \$0.00 any property on a	Reason for this payment Help & support of elderly relatives (Debtor's wife's uncle) Reason for this payment Recount of a debt that benefited
Insiders include your relatives; any general of which you are an officer, director, person a business you operate as a sole proprietor alimony. No Yes. List all payments to an insider. Insider's Name and Address Horace Drake Manor Care Facility Within 1 year before you filed for bankruinsider? Include payments on debts guaranteed or office the payments on debts guaranteed or office yes. List all payments to an insider	partners; relatives of any ger in control, or owner of 20% or. 11 U.S.C. § 101. Include partners of payment Dates of payment June 2015 - current uptcy, did you make any pay cosigned by an insider. Dates of payment	Total amount paid \$3,000.00	erships of which yog securities; and a c support obligation Amount you still owe \$0.00	Reason for this payment Help & support of elderly relatives (Debtor's wife's uncle)
Insiders include your relatives; any general of which you are an officer, director, person a business you operate as a sole proprietor alimony. No Yes. List all payments to an insider. Insider's Name and Address Horace Drake Manor Care Facility Within 1 year before you filed for bankruinsider? Include payments on debts guaranteed or office the payments of the payments to an insider Insider's Name and Address	partners; relatives of any ger in control, or owner of 20% or. 11 U.S.C. § 101. Include partners of payment June 2015 - current Dates of payment any paycosigned by an insider. Dates of payment silons, and Foreclosures	Total amount paid \$3,000.00 Total amount paid \$3,000.00	Amount you still owe Amount you still owe Amount you still owe Amount you still owe	Reason for this payment Help & support of elderly relatives (Debtor's wife's uncle) Reason for this payment Help & relatives (Debtor's wife's uncle)
Insiders include your relatives; any general of which you are an officer, director, person a business you operate as a sole proprietor alimony. No Yes. List all payments to an insider. Insider's Name and Address Horace Drake Manor Care Facility Within 1 year before you filed for bankruinsider? Include payments on debts guaranteed or company of the company of	partners; relatives of any ger in control, or owner of 20% or. 11 U.S.C. § 101. Include partners of payment June 2015 - current Dates of payment any paycosigned by an insider. Dates of payment silons, and Foreclosures	Total amount paid \$3,000.00 Total amount paid \$3,000.00	Amount you still owe Amount you still owe Amount you still owe Amount you still owe	rative proceeding?

Page 36 of 58 Document Debtor 1 Benjamin Washington Case number (if known) 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: Deceased brother's wife **Tombstone** June 2015 \$700.00 Person's relationship to you: Sister-in-law \$10,000 given to facility to pay off January 2015 \$10,000.00 Chase City Health & Rehab Center deceased brother's debt. Person's relationship to you: none 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Dates you Value Describe what you contributed more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending

insurance claims on line 33 of Schedule A/B: Property.

Case 16-31748-KRH

Doc 1

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Debtor 1 Benjamin Washington Document Page 37 of 58 Case number (if known)

Pa	rt 7: List Certain Payments or Transfers				
16.	Within 1 year before you filed for bankruptcy, or consulted about seeking bankruptcy or prepare Include any attorneys, bankruptcy petition prepare	ing a bankruptcy petition?			rty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid	Description and value of any prope	erty	Date payment	Amount of
	Address	transferred	,	or transfer was	payment
	Email or website address Person Who Made the Payment, if Not You			made	
	CIN Group	\$53 for joint credit report		4/4/2016	\$53.00
	4540 Honeywell Ct.				
	Dayton, OH 45424				
	America Law Group, Inc. 8501 Mayland Dr. Suite 106 Henrico, VA 23294	\$537 paid to pre-filing expense filing fee, \$227 attorney's fees. promised toward overall attorn fees.	\$5,100	3/28/2016	\$537.00
	Access Counseling 633 W 5th Street Suite 26001 Los Angeles, CA 90071	\$15 for credit counseling		4/6/2016	\$15.00
	promised to help you deal with your creditors Do not include any payment or transfer that you lis		•		
	☐ Yes. Fill in the details.				
	Person Who Was Paid Address	Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment
10	Within 2 years before you filed for bankruptcy,	did you sall trade or otherwise trans	for any prop	orty to anyone othe	r than property
10.	transferred in the ordinary course of your busing line lude both outright transfers and transfers made include gifts and transfers that you have already line lude. No	ness or financial affairs? as security (such as the granting of a se			
	Yes. Fill in the details.				
	Person Who Received Transfer Address	Description and value of property transferred		any property or received or debts change	Date transfer was made
	Person's relationship to you		para iii ox	onango	
	Southside Auto Junkyard address unknown	Ford Taurus	\$400		June 2015
	none				
	Cornerstone LLC unknown	934 West Wythe St. Petersburg, VA (Real Estate Tax Assessment: \$22,100)	\$2,000 re pay bills)	eceived (used to	December 2015
	none	/ 100000111011111 \\\\\\\\\\\\\\\\\\\\\			

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Debtor 1 Benjamin Washington

	Person Who Received Transfer Address Person's relationship to you	Description and valu property transferred	e of	Describe any prop payments received paid in exchange	•	Date transfer was nade
	Cornerstone LLC unknown	844 Hinton St. Pet VA (Zillow valuati \$74,932)		\$2,000 received to pay bills	used [December 2015
	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protection No		roperty to a s	elf-settled trust or sin	nilar device of	which you are a
	☐ Yes. Fill in the details.					
	Name of trust	Description and value	e of the prope	erty transferred		Oate Transfer was nade
Par	List of Certain Financial Accounts, Instru	ıments, Safe Deposit Bo	oxes, and Stor	age Units		
	Within 1 year before you filed for bankruptcy, w sold, moved, or transferred? Include checking, savings, money market, or or houses, pension funds, cooperatives, associat No	ther financial accounts	; certificates o	f deposit; shares in b		
	Yes. Fill in the details.	(4 di - di d		1		Last balance
		_	ype of accoun sstrument	t or Date accou closed, sole moved, or transferred		Last balance before closing or transfer
	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for ba	nkruptcy, any	safe deposit box or o	other depositor	ry for securities,
	■ No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access Address (Number, Stree State and ZIP Code)		Describe the contents		Do you still have it?
22.	Have you stored property in a storage unit or p	place other than your ho	me within 1 ye	ear before you filed fo	or bankruptcy?	
	□ No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had to it? Address (Number, Stree State and ZIP Code)		Describe the contents		Do you still have it?
	Chesterfield MiniStorage 11320 Iron Bridge Rd. Chester, VA 23831	Benjamin and Jan Washington 5631 Drayton Landing (Chester, VA	g	Bicycle, 2 lawnmow jate, plant stand, to poxes of papers		□ No ■ Yes
Par	t 9: Identify Property You Hold or Control for	Someone Else				
23.	Do you hold or control any property that some for someone.		any property	you borrowed from,	are storing for,	or hold in trust
	■ No □ Yes. Fill in the details.					
		Where is the man and		Nagariba tha mangata		Valera
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the propert (Number, Street, City, State Code)		escribe the property		Value

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Debtor 1 Benjamin Washington

Part 10: Give Details About Environmental Information

For	the	nurnose	of Par	t 10. t	the f	following	definitions	annly
. 0	HILE	puipose	, Oi i ai	ι ιυ,	uici	OHOWHING	ucillilitions	appiy

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

	Site means any location, facility, or property to own, operate, or utilize it, including dispo		aw, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an envi hazardous material, pollutant, contaminant,		waste, hazardous substance, toxic s	substance,
Rep	ort all notices, releases, and proceedings tha	at you know about, regardless of when	they occurred.	
24.	Has any governmental unit notified you that	you may be liable or potentially liable	under or in violation of an environm	ental law?
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of	any release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adm	ninistrative proceeding under any envir	onmental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	t 11: Give Details About Your Business or 0	Connections to Any Business		
27.	Within 4 years before you filed for bankrupto	cy, did you own a business or have any	of the following connections to any	y business?
	☐ A sole proprietor or self-employed in	n a trade, profession, or other activity, e	either full-time or part-time	
	☐ A member of a limited liability compa	any (LLC) or limited liability partnershi	p (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing exe	ecutive of a corporation		
	☐ An owner of at least 5% of the voting	or equity securities of a corporation		
	■ No. None of the above applies. Go to P	art 12.		
	Yes. Check all that apply above and fill			
	Business Name Address	Describe the nature of the business	Employer Identification numbe Do not include Social Security	
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed	

Official Form 107

Page 40 of 58 Document Case number (if known) Debtor 1 Benjamin Washington 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Benjamin Washington Signature of Debtor 2 **Benjamin Washington** Signature of Debtor 1 Date Date April 5, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Document Page 41 of 58 United States Bankruptcy Court

Eastern District of Virginia

In	n re Benjamin Washington	Case No.	
	Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENSATION OF ATTORN IN A CHAPTER 13 CASE (for use in the Bickword Division on		<u>DEBTOR</u>
	(for use in the Richmond Division on	1y)	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the compensation paid to me, for services rendered or to be rendered on behalf of the debtor bankruptcy case is as follows:		
	For legal services, I have agreed to accept	\$	5,100.00
	Prior to the filing of this statement I have received	\$	227.00
	Balance Due	\$	4,873.00
2.	\$310.00 of the filing fee has been paid.		
3.	The source of the compensation paid to me was:		
	\blacksquare Debtor \square Other (specify)		
4.	The source of compensation to be paid to me is:		
	$lacktriangle$ Debtor \Box Other (specify)		
5.	■ I have not agreed to share the above-disclosed compensation with any other person unless	s they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are copy of the agreement, together with a list of the names of the people sharing in the comp		
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the Bankruptcy Rule $2016-1(C)(3)$.	ne bankruptcy o	case, as required by Local
7.	I am electing to request compensation and reimbursement of expenses in this case:		
	a. ■ In accordance with the "no-look" fee set forth in Local Bankruptcy Rule 2016-1(C)	(1)(a) and (C)(3	3)(a).
	b. □ By submitting applications for compensation in the manner set forth in Local Bankı	ruptcy Rule 201	16-1(C)(1)(c)(ii).
	An attorney for the debtor that fails to make the election to request compensation pursuar (C)(3)(a) at the commencement of the case will be deemed to have elected to request com-		

Bankruptcy Rule 2016-1(C)(1)(c)(ii).

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CERTIFICATION

I certify that the foregoing is an accurate statement of any	agreement or arrangement for payment to me for representation of the de	ebtor(s) in
this bankruptcy proceeding.		

April	5, 2016	
Date		

/s/ Richard J. Oulton for America Law Group Richard J. Oulton for America Law Group Signature of Attorney

America Law Group, Inc. dba Debt Law Group

Name of Law Firm

America Law Group, Inc. dba Debt Law Group 8501 Mayland Dr., Ste 106 Henrico, VA 23294 804-308-0051 Fax: 804-308-0053

NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED STATES TRUSTEE PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND CLERK'S CM/ECF POLICY 9

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

PROOF OF SERVICE

The undersigned hereby certifies that on this date the foregoing Notice was served upon the debtor(s), the standing Chapter 13 trustee, and U. S. trustee pursuant to Local Bankruptcy Rule 2016-1(C) and the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class mail).

April	5, 2016	
Data		

/s/ Richard J. Oulton for America Law Group Richard J. Oulton for America Law Group Signature of Attorney

Fill in this inform	nation to identify your case:
Debtor 1	Benjamin Washington
Debtor 2 (Spouse, if filing)	
United States B	sankruptcy Court for the: Eastern District of Virginia
Case number (if known)	

Check	as directed in lines 17 and 21:
1	ording to the calculations required by this tement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Colui Debte		Columi Debtor non-fil	
Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).	and co	mmissio	ons (before all	\$	6,954.47	\$	0.00
Alimony and maintenance payments. Do not include Column B is filled in.	payme	nts from	a spouse if	\$	0.00	\$	0.00
All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3. Net income from operating a business,	Include I, your do ouse of	e regular depende nly if Col	contributions nts, parents,	\$	0.00	\$	0.00
profession, or farm	Debtor						
Gross receipts (before all deductions)	\$	0.00					
Ordinary and necessary operating expenses	- \$	0.00					
Net monthly income from a business, profession, or farm	m\$	0.00	Copy here ->	\$	0.00	\$	0.00
Net income from rental and other real property	Debtor	1					
Gross receipts (before all deductions)	\$	0.00					
Ordinary and necessary operating expenses	-\$	0.00					
Net monthly income from rental or other real property	. —	0.00	Copy here ->	ch.	0.00	\$	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Case number (if known)

Column B Column A Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 \$ 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 **Veterans Benefits** 2.122.48 pro-rated tax refund 406.00 0.00 Total amounts from separate pages, if any. 0.00 \$ 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 9,482.95 0.00 9,482.95 each column. Then add the total for Column A to the total for Column B. Total average Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 9,482.95 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 9,482.95 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 9.482.95 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12 113,795.40 15b. The result is your current monthly income for the year for this part of the form.

Benjamin Washington

Debtor 1

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Debt	or 1	Ben	jamin Washington		Case number (if kn	own)		
16	. Cal	culate	the median family income that applies to y	/ou. Follow	these steps:			
	16a	. Fill in	the state in which you live.	V	<u> </u>			
	16h	Fill in	the number of people in your household.	3				
			the median family income for your state and				æ	79,956.00
	100	To fir	nd a list of applicable median income amounts	s, go online	using the link specified in the separa	ate	Φ	
17	. Hov		actions for this form. This list may also be avaine lines compare?	liable at the	е рапктиртсу сіетк s опісе.			
	17a	_	Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N					etermined under
	17b	•	Line 15b is more than line 16c. On the top (1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 a	ulation of				
Par	t 3:	Cal	culate Your Commitment Period Under 11	U.S.C. § 1	325(b)(4)			
18.	Cop	y you	r total average monthly income from line 1	1.		\$		9,482.95
19.	con	end th	ne marital adjustment if it applies. If you are not calculating the commitment period under 1 ncome, copy the amount from line 13.	married, y 1 U.S.C. §	our spouse is not filing with you, and 1325(b)(4) allows you to deduct part	l you t of your		
	19a	. If the	marital adjustment does not apply, fill in 0 on	line 19a.		-\$		0.00
	19b	Subt	ract line 19a from line 18.				\$	9,482.95
20.			your current monthly income for the year.					9,482.95
	20a		line 19b				\$	9,402.93
		Multi	ply by 12 (the number of months in a year).				X	12
	20b	. The r	result is your current monthly income for the you	ear for this	part of the form		\$	113,795.40
	20c	Сору	the median family income for your state and	size of hou	sehold from line 16c		\$	79,956.00
	21.	How	do the lines compare?					
			Line 20b is less than line 20c. Unless otherwing period is 3 years. Go to Part 4.	se ordered	by the court, on the top of page 1 of	this form, check bo	x 3, Th	e commitment
			Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	less other	wise ordered by the court, on the top	of page 1 of this for	rm, che	ck box 4, The
Par	t 4:	Sig	ın Below					
	Bys	igning	here, under penalty of perjury I declare that t	he informa	tion on this statement and in any atta	achments is true an	d corre	ct.
)	(/s/	Benj	amin Washington					
			in Washington e of Debtor 1					
	•	•	ril 5, 2016					
		MM	/DD /YYYY					
	-		cked 17a, do NOT fill out or file Form 122C-2.					
	If yo	u che	cked 17b, fill out Form 122C-2 and file it with t	this form. C	In line 39 of that form, copy your curi	rent monthly income	e from I	ine 14 above.

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Fill in	this information to	entify your case:				
Debtor	r 1 Benjami n	Washington				
Debtor (Spous	r 2 se, if filing)					
United	States Bankruptcy C	urt for the: Eastern District of Vi	rginia			
Case r	number wn)			☐ Check i	f this is an amende	d filing
Official	I Form 122C-2					
Cha	pter 13 Cal	ulation of Your Dis	sposable Inco	me		04/16
Commi Be as o space i	itment Period (Offici complete and accura is needed, attach a s	need your completed copy of (I Form 122C-1). e as possible. If two married pe parate sheet to this form, Inclu- name and case number (if know	ople are filing together, b	ooth are equally respon	sible for being accu	rate. If more
Part 1	: Calculate Your	Deductions from Your Income				
the	questions in lines 6	rvice (IRS) issues National and 5. To find the IRS standards, go available at the bankruptcy cler	online using the link sp			
expe	enses if they are high	nts set out in lines 6-15 regardless r than the standards. Do not include t any amounts that you subtracted	le any operating expenses	that you subtracted from	n income in lines 5 an	our actual d 6 of Form
If yo	our expenses differ fro	n month to month, enter the avera	ge expense.			
Note	e: Line numbers 1-4 a	e not used in this form. These nun	nbers apply to information	required by a similar forn	n used in chapter 7 ca	ises.
5.	The number of peo	le used in determining your ded	luctions from income			
		eople who could be claimed as ex y additional dependents whom yo in your household.			3	
Nati	ional Standards	You must use the IRS Nationa	al Standards to answer the	questions in lines 6-7.		
6.		other items: Using the number of ollar amount for food, clothing, an		5 and the IRS National	\$	1,249.00
7.	the dollar amount fo people who are 65 c	a care allowance: Using the number out-of-pocket health care. The number-because older people have mount, you may deduct the additi	nber of people is split into a higher IRS allowance fo	two categoriespeople w	ho are under 65 and	

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	Benjamin Washington		2 47 of 58 Case number (if	known)	
eople v	who are under 65 years of age				
7a.	Out-of-pocket health care allowance per person	\$ 60			
7b.	Number of people who are under 65	X 3			
7c.	Subtotal. Multiply line 7a by line 7b.	\$180.00	Copy here=	> \$180	.00
eople v	who are 65 years of age or older				
7d.	Out-of-pocket health care allowance per person	\$ 144			
7e.	Number of people who are 65 or older	x 0			
7f.	Subtotal. Multiply line 7d by line 7e.	\$	Copy here=	> \$0.	.00_
7g.	Total. Add line 7c and line 7f		\$180.00_	Copy total h	ere=> \$ <u>180.00</u>
eparate	ver the questions in lines 8-9, use the U.S. Truste e instructions for this form. This chart may also l using and utilities - Insurance and operating exp	e available at the b	ankruptcy clerk's off	fice.	opcomod in the
	ne dollar amount listed for your county for insurance	and operating expen		itered in line 5, fill	\$ 538.0
in th		and operating expen		itered in line 5, fill	\$538.0
in th	ne dollar amount listed for your county for insurance	fill in the dollar amou	ses.	\$1,452.	\$538.0
in th . Hou 9a.	ne dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expense	fill in the dollar amou	nt	=-	\$538.0
in th . Hou 9a.	ne dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5,	fill in the dollar amounts. and other debts secund all amounts that a	nt red by your home. re	=-	\$538.0
in th . Hot 9a.	ne dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expense. Total average monthly payment for all mortgages. To calculate the total average monthly payment, a contractually due to each secured creditor in the 6	fill in the dollar amounts. and other debts secund all amounts that a	nt red by your home. re e	=-	\$538.0
in th . Hot 9a.	ne dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expense. Total average monthly payment for all mortgages. To calculate the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.	fill in the dollar amounts. and other debts secund all amounts that a mounts after you file. Average more payment	nt red by your home. re e	=-	\$538.0
in the Hou	ne dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expense. Total average monthly payment for all mortgages. To calculate the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60. Name of the creditor	fill in the dollar amounts. and other debts secund all amounts that a commonth after you file. Average more payment.	red by your home. re e	=-	\$ 538.0
in th . Hot 9a.	ne dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expense. Total average monthly payment for all mortgages. To calculate the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60. Name of the creditor Sun West Mortgage Co I	fill in the dollar amounts. and other debts secund all amounts that a commonth after you file. Average more payment.	nt red by your home. re e hthly 53.00 Copy	\$ <u>1,452</u>	.00 Repeat this amoun

Explain why:

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

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Debtor 1	Benjamin Washington				Case number (if known)		
11.	Local transportation expenses: Check the n	umber of vehic	cles for whi	ch you claim	an ownershi	p or operating	expense.	
	☐ 0. Go to line 14.							
	☐ 1. Go to line 12.							
	2 or more. Go to line 12.							
12.	Vehicle operation expense: Using the IRS Looperating expenses, fill in the <i>Operating Costs</i>							488.00
13.	Vehicle ownership or lease expense: Using You may not claim the expense if you do not not more than two vehicles.							
Ve	hicle 1 Describe Vehicle 1: 2005 Merce NADA Clea		320 CDI 1	02,467 mile	es Valuatio	on:		
13a.	Ownership or leasing costs using IRS Local St	andard			\$	517.00		
13b.	Average monthly payment for all debts secure	d by Vehicle 1.						
	Do not include costs for leased vehicles.							
	To calculate the average monthly payment her are contractually due to each secured creditor bankruptcy. Then divide by 60.				at			
	Name of each creditor for Vehicle 1		Average payment					
	Va Credit Union		\$\$	224.51				
	Total Average Month	ılv Pavment	\$	224.51	Copy here =>	-\$ 224	Repeat this amount on line 33b.	
		, ., .			liele =>	Ψ	ille 33b.	
13c.	Net Vehicle 1 ownership or lease expense	:-	t				Copy net Vehicle 1	
	Subtract line 13b from line 13a. if this number	is iess than \$0	, enter \$0.		. \$	292.49	expense here => \$ _	292.49
Ve	hicle 2 Describe Vehicle 2:						_	
13d.	Ownership or leasing costs using IRS Local St					0.00		
13e.	Average monthly payment for all debts secure leased vehicles.	d by Vehicle 2.	. Do not inc	lude costs fo	r			
	Name of each creditor for Vehicle 2		Average payment					
	-NONE-		\$					
	Total average month	ly payment	\$	0.00	Copy here => -\$ _	0.0	Repeat this amount on line 33c.	
13f	Net Vehicle 2 ownership or lease expense						Copy net	
101.	Subtract line 13e from line 13d. if this number	is less than \$0	, enter \$0.				Vehicle 2 expense here	
					\$	0.00	=> \$ _	0.00
14.	Public transportation expense: If you claim Public Transportation expense allowance r						the \$	0.00
15.	Additional public transportation expense: I also deduct a public transportation expense, y not claim more than the IRS Local Standard for	ou may fill in w	hat you be					0.00

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Debtor 1 Benjamin Washington Case number (if known)

	er Necessary Expenses	In addition to the expense the following IRS categorie		e, you are allowed your monthly expenses	s for	
16.	self-employment taxes, soo your pay for these taxes. H	cial security taxes, and Medi owever, if you expect to recount of total monthly amour	care taxes. You may in eive a tax refund, you r	nd local taxes, such as income taxes, clude the monthly amount withheld from nust divide the expected refund by 12 of for taxes.	\$	1,021.00
17.	Involuntary deductions: To contributions, union dues, a	The total monthly payroll dec	ductions that your job re	equires, such as retirement		
			ob, such as voluntary 40	01(k) contributions or payroll savings.	\$	0.00
18.	filing together, include payr	ments that you make for you or life insurance on your dep	ır spouse's term life insi	fe insurance. If two married people are urance. g spouse's life insurance, or for any form	\$	27.00
19.	administrative agency, suc	The total monthly amount to as spousal or child support past due obligations for st	rt payments.	by the order of a court or You will list these obligations in line 35.	\$	0.00
20.		hly amount that you pay for			_	
	as a condition for your j			·		
	for your physically or me	entally challenged depender	nt child if no public educ	cation is available for similar services.	\$	0.00
21.		aly amount that you pay for our or any elementary or second	•	sitting, daycare, nursery, and preschool.	\$	0.00
22.	that is required for the heal		r dependents and that	amount that you pay for health care is not reimbursed by insurance or paid al entered in line 7.		0.00
	•	nce or health savings accou			\$	0.00
23.	for you and your dependent phone service, to the exter- income, if it is not reimburs Do not include payments for	ts, such as pagers, call wait t necessary for your health ed by your employer. or basic home telephone, int	ing, caller identification and welfare or that of your ternet and cell phone se	you pay for telecommunication services, special long distance, or business cell our dependents or for the production of ervice. Do not include self-employment nount you previously deducted.	+\$	0.00
			· · · · · · · · · · · · · · · · · · ·			
24.	Add all of the expenses a	llowed under the IRS expe	ense allowances.		\$	3,795.49
	Add all of the expenses a Add lines 6 through 23. itional Expense Deduction	ns These are additional of	ense allowances. deductions allowed by tany expense allowance		\$	3,795.49
Add	Add lines 6 through 23. itional Expense Deduction Health insurance, disabil	ns These are additional of Note: Do not include a lity insurance, and health s	deductions allowed by tany expense allowance		<u> </u>	3,795.49
Add	Add lines 6 through 23. itional Expense Deduction Health insurance, disabilinsurance, disability insurance.	ns These are additional of Note: Do not include a lity insurance, and health s	deductions allowed by tany expense allowance	s listed in lines 6-24. nses. The monthly expenses for health	<u> </u>	3,795.49
Add	Add lines 6 through 23. itional Expense Deduction Health insurance, disabil insurance, disability insurance, your dependents.	ns These are additional of Note: Do not include a lity insurance, and health s	deductions allowed by to any expense allowance savings account experounts that are reasonal	s listed in lines 6-24. nses. The monthly expenses for health	<u> </u>	3,795.49
Add	Add lines 6 through 23. itional Expense Deduction Health insurance, disabil insurance, disability insurary your dependents. Health insurance	These are additional of Note: Do not include a sty insurance, and health since, and health savings acc	deductions allowed by to any expense allowance savings account expense ounts that are reasonal \$	s listed in lines 6-24. nses. The monthly expenses for health	<u> </u>	3,795.49
Add	Add lines 6 through 23. itional Expense Deduction Health insurance, disability insurance, our dependents. Health insurance Disability insurance	These are additional of Note: Do not include a sty insurance, and health since, and health savings acc	deductions allowed by to any expense allowance savings account experience ounts that are reasonal \$ 549.00 \$ 0.00	s listed in lines 6-24. nses. The monthly expenses for health	<u> </u>	3,795.49
Add	Add lines 6 through 23. itional Expense Deduction Health insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account	These are additional of Note: Do not include a sity insurance, and health since, and health savings according to the same of the savings according to the savings according	deductions allowed by to any expense allowance savings account experience ounts that are reasonal \$ 549.00 \$ 0.00 \$ 0.00	is listed in lines 6-24. nses. The monthly expenses for health oly necessary for yourself, your spouse, o	or	
Add	Add lines 6 through 23. itional Expense Deduction Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this	These are additional of Note: Do not include a sity insurance, and health since, and health savings according to the same of the savings according to the savings according	deductions allowed by to any expense allowance savings account experience ounts that are reasonal \$ 549.00 \$ 0.00 \$ 0.00	is listed in lines 6-24. nses. The monthly expenses for health oly necessary for yourself, your spouse, o	or	
Add 25.	Add lines 6 through 23. itional Expense Deduction Health insurance, disabili insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this No. How much do you yes Continued contributions continue to pay for the reasyour household or member	These are additional of Note: Do not include a sty insurance, and health since, and health savings according total amount? You actually spend? To the care of household conable and necessary care	deductions allowed by to any expense allowance savings account experiounts that are reasonal \$ 549.00 \$ 0.00 \$ 0.00 \$ 549.00 \$ 549.00 \$ 549.00	copy total here=> Copy total here=> e actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may	or	
25.	Add lines 6 through 23. itional Expense Deduction Health insurance, disabil insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this No. How much do your yes Continued contributions continue to pay for the reasyour household or member include contributions to an Protection against family	These are additional of Note: Do not include a lity insurance, and health since, and health savings according total amount? Tou actually spend? To the care of household conable and necessary care of your immediate family we account of a qualified ABLE violence. The reasonably respectively.	deductions allowed by to any expense allowance savings account experience ounts that are reasonal \$	copy total here=> Copy total here=> e actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may	or\$	549.00

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	Benjamin Washington	Case nu	umber (<i>if known</i>)				
	Additional home energy costs. Your hom ine 8.	e energy costs are included in your insurance ar	nd operating e	expense	s on		
	f you believe that you have home energy c B, then fill in the excess amount of home en	osts that are more than the home energy costs in ergy costs	ncluded in exp	penses (on line		
	You must give your case trustee documenta amount claimed is reasonable and necessa	ation of your actual expenses, and you must sho	w that the ado	ditional		\$_	0.00
;		Iren who are younger than 18. The monthly expendent children who are younger than 18 years					
	You must give your case trustee documenta claimed is reasonable and necessary and n	ation of your actual expenses, and you must exp not already accounted for in lines 6-23.	lain why the a	amount			
,	Subject to adjustment on 4/01/19, and ever	ery 3 years after that for cases begun on or after	the date of a	djustmer	nt.	\$_	0.00
I	Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.						
	To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.						
,	You must show that the additional amount of	claimed is reasonable and necessary.				\$_	43.00
	Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).						
ı	Do not include any amount more than 15% of your gross monthly income.						0.00
	Add all of the additional expense deductions. Add lines 25 through 31.					\$	842.00
Dedu	ctions for Debt Payment						
	ooo.						
22 -	ar dabta that are cooured by an interest	in neanage, that you awa induding hama ma	"tacacc	iala.			
	or debts that are secured by an interest ans, and other secured debt, fill in lines	in property that you own, including home mo 33a through 33e.	rtgages, veh	icle			
lo Te	ans, and other secured debt, fill in lines	33a through 33e. ent, add all amounts that are contractually due to					
lo Te	ans, and other secured debt, fill in lines of calculate the total average monthly paym	33a through 33e. ent, add all amounts that are contractually due to					ge monthly
I c Cr	ans, and other secured debt, fill in lines o calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home	33a through 33e. ent, add all amounts that are contractually due to nkruptcy. Then divide by 60.	o each secure	ed		paymo	ent
I c Cr	ans, and other secured debt, fill in lines o calculate the total average monthly paym editor in the 60 months after you file for bar Mortgages on your home Copy line 9b here	33a through 33e. ent, add all amounts that are contractually due to	o each secure	ed	.=> 		
I c Cr	ans, and other secured debt, fill in lines o calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles	33a through 33e. ent, add all amounts that are contractually due to nkruptcy. Then divide by 60.	o each secure	ed	=>	paymo	ent
Ic To cr 33a.	ans, and other secured debt, fill in lines o calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles	33a through 33e. ent, add all amounts that are contractually due to nkruptcy. Then divide by 60.	o each secure	ed	=>	paymo	ent
10 Tr cr 33a. 33b.	ans, and other secured debt, fill in lines o calculate the total average monthly paym editor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here	33a through 33e. ent, add all amounts that are contractually due to nkruptcy. Then divide by 60.	o each secure	ed	•	paymo	1,453.00
33a. 33b. 33c.	ans, and other secured debt, fill in lines o calculate the total average monthly paym editor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here	33a through 33e. ent, add all amounts that are contractually due to nkruptcy. Then divide by 60.	o each secure	ed	=>	\$	1,453.00 224.51
33a. 33b. 33c.	ans, and other secured debt, fill in lines o calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here	33a through 33e. ent, add all amounts that are contractually due to nkruptcy. Then divide by 60.	Doe inclu	ed s payme	=> => ent s	\$	1,453.00 224.51
33a. 33b. 33c.	ans, and other secured debt, fill in lines o calculate the total average monthly paym editor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	33a through 33e. ent, add all amounts that are contractually due to nkruptcy. Then divide by 60.	Doe incluor in	es payme	=> => ent s	\$	1,453.00 224.51
33a. 33b. 33c.	ans, and other secured debt, fill in lines o calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractually due to nkruptcy. Then divide by 60.	Doe incluor in	es payme ude taxe asurance	=> => ent s	\$	1,453.00 224.51
33a. 33b. 33c.	ans, and other secured debt, fill in lines o calculate the total average monthly paym editor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	33a through 33e. ent, add all amounts that are contractually due to nkruptcy. Then divide by 60.	Doe incluor in	es payme	=> => ent s	\$	1,453.00 224.51
33a. 33b. 33c.	ans, and other secured debt, fill in lines o calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractually due to nkruptcy. Then divide by 60.	Doe incluor in	es payme ude taxe asurance	=> => ent s	\$\$ \$\$	1,453.00 224.51
33a. 33b. 33c.	ans, and other secured debt, fill in lines o calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractually due to nkruptcy. Then divide by 60.	Doe incluor in	es payme ude taxe usurance No Yes	=> => ent s	\$\$ \$\$	1,453.00 224.51
33a. 33b. 33c.	ans, and other secured debt, fill in lines o calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractually due to nkruptcy. Then divide by 60.	Doe incluor in	es payme ude taxe asurance No Yes No Yes	=> => ent s	\$ \$ \$	1,453.00 224.51
33a. 33b. 33c.	ans, and other secured debt, fill in lines o calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractually due to nkruptcy. Then divide by 60.	Doe incluor in	es payme ude taxe isurance No Yes No Yes	=> => ent s s?	payme	1,453.00 224.51
33a. 33b. 33c.	ans, and other secured debt, fill in lines o calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractually due to nkruptcy. Then divide by 60.	Doe incluor in	es payme ude taxe asurance No Yes No Yes	=> => ent s s?	\$ \$ \$	1,453.00 224.51
Id Tr cr 33a. 33b. 33c. 33d. Name	ans, and other secured debt, fill in lines o calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt	and all amounts that are contractually due to hkruptcy. Then divide by 60. Identify property that secures the debt	Doe incluor in	es payme ude taxe isurance No Yes No Yes No Yes	=> => ent s s?	\$ \$	1,453.00 224.51

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otor 1	Benj	amin Washington			Cas	e nı	umber (if known)			
		debts that you listed in lin property necessary for yo) ,				
	No.	Go to line 35.								
		State any amount that you	must pay to a creditor, in	addition to th	ne payments					
		listed in line 33, to keep po Next, divide by 60 and fill in	ssession of your property							
Name o	of the	creditor	Identify property that sec	cures the deb	t	To	tal cure amount		/lonthly imount	
-NON	E-				\$	_		÷ 60 = \$		
								Copy		
					Total	\$	0.00	here=	> \$_	0.00
_										
are	past	owe any priority claims - so due as of the filing date of		• • •	•					
_		Go to line 36.								
	Yes.	Fill in the total amount of a ongoing priority claims, such	' '		le current or					
		Total amount of all past-d	ue priority claims			\$	0.00	÷ 60	\$	0.00
6. Pro	jecte	d monthly Chapter 13 plar	payment			\$	2,596.50	_		
Office the To fi	ce of Execund a li	nultiplier for your district as s the United States Courts (fo utive Office for United States st of district multipliers that inclu- structions for this form. This lis	r districts in Alabama and s Trustees (for all other dis des your district, go online us	North Carolistricts). Sing the link sp	na) or by ecified in the	X .	6.70			
•		monthly administrative expe	•	. ,			_{\$} 173.97	Copy total		173.9
7100	lago	monthly deministrative expe	1100			Į	Ψ			
		of the deductions for deb s 33e through 36.	payment.						\$	1,851.48
Γotal D	educ	tions from Income								
38. Add	l all o	f the allowed deductions.								
		e 24, All of the expenses al	lowed under IRS	\$	3,795.49)				
Co	py lin	e 32, All of the additional ex	pense deductions	\$	842.00)_				
Co	py lin	e 37, All of the deductions f	or debt payment	+\$	1,851.48	3	_			
т-	دما ماء	ductions		\$	6.488.97	,	Copy total here=>		\$	6.488.97
10	ıaı ut	ductions		ĮΨ	0,700.31		Copy total nere=>	•	φ	0,700.0

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Debtor 1	Benjamin Wa	shington		Case	number (<i>if known</i>)		
Part 2:	Determine Yo	our Disposable Income Under	11 U.S.C. § 1325(b)(2)			
		rrent monthly income from lin Current Monthly Income and				\$_	9,482.95
chi disa rec	Idren. The month ability payments eived in accorda	bly necessary income you rec hly average of any child support for a dependent child, reported i nce with applicable nonbankrupt bended for such child.	payments, foster care n Part I of Form 122C	payments, or -1, that you	\$	0.00	
em in 1	ployer withheld fi	retirement deductions. The moreon wages as contributions for co)(7) plus all required repayment C. § 362(b)(19).	ualified retirement pla	ins, as specified	\$	894.00	
42. Tot	al of all deducti	ons allowed under 11 U.S.C. §	707(b)(2)(A). Copy li	ne 38 here=>	\$	6,488.97	
exp the	enses and you hir expenses. You	cial circumstances. If special cinave no reasonable alternative, or must give your case trustee a condocumentation for the expenses	describe the special ci etailed explanation of	rcumstances and			
Descri	be the special c	ircumstances	1	Amount of expen	se		
-	Repayment o	f retirement fund Ioan	\$.	88.	00		
-			\$				
-			\$				
			Total \$	88.00	Copy here=>\$	88	3.00
44. Tot	al adjustments.	Add lines 40 through 43.		=> \$	7,470.	.97 Copy	/ => -\$
45. Ca l	-	nthly disposable income unde	r § 1325(b)(2). Subtra	act line 44 from lin	e 39.	\$	\$2,011.98
hav time you	re changed or are e your case will b r filed your petition	or expenses. If the income in Fe virtually certain to change afte be open, fill in the information be on, check 122C-1 in the first colul in when the increase occurred,	the date you filed you low. For example, if th mn, enter line 2 in the	ur bankruptcy peti ne wages reported second column, e	tion and durin increased aft	g the er	
Form	Line	Reason for change		Date of change	Increase of		ount of change
☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220	C-2 C-1 C-2 C-1 C-1				☐ Increas ☐ Decrea ☐ Increas ☐ Decrea ☐ Increas ☐ Decrea ☐ Increas ☐ Decrea	se \$	

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Debtor 1	Benjamin Washington	Case number (if known)
Part 4:	Sign Below	
E	By signing here, under penalty of perjury you declare that the inform	nation on this statement and in any attachments is true and correct.
X.	Is/ Benjamin Washington Benjamin Washington Signature of Debtor 1	
Date	April 5, 2016 MM / DD / YYYY	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Amex

Correspondence PO Box 981540 El Paso, TX 79998

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> 2401 International Madison, WI 53704

Bank Of America Nc4-105-03-14 PO Box 26012 Greensboro, NC 27410

Va Credit Union PO Box 90010 Richmond, VA 23225

Chase Card Services Attn: Correspondence Dept PO Box 15298 Wilmington, DE 19850

Virginia Credit Union PO Box 90010 Richmond, VA 23225-9010

Great Lakes Educational Loans 2401 International Lane Madison, WI 53704

Virginia Family Dentistry 1612 Huguenot Rd Midlothian, VA 23113

Heart Care Associates 5303 Plaza Dr. Suite 102 Hopewell, VA 23860

Lending Club Corp 71 Stevenson St Suite 300 San Francisco, CA 94105

Nc Financial 200 W Jackson Blvd Ste 2 Chicago, IL 60606

Net Credit 200 W Jackson Blvd Suite 2400 Chicago, IL 60606

Sun West Mortgage Co I 18303 Gridley Rd Cerritos, CA 90703

U.S. Dept of Agriculture Military Deposit & Reconciliat P.O. Box 61081 New Orleans, LA 70161